L19000052821

(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to I	Filing Officer:	-
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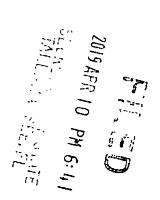
Office Use Only



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04/10/19--01011--005 **25.00

R. WHITE



COVER LETTER

Contents Caring Company, LLC UBJECT: Name of Limited Liability Company he enclosed Articles of Amendment and fee(s) are submitted for filing. lease return all correspondence concerning this matter to the following: Richard Gleason Name of Person Contents Caring Company, LLC Firm/Company 166 Byrd Dr. Address Panama City, FL. 32404 City/State and Zip Code ccc850@yahoo.com E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: chard Gleason Name of Person Daytime Telephone Number closed is a check for the following amount: \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

O:

Registration Section Division of Corporations

> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Contents Caring Company, LLC

mpany has been notified in writing of this change.

FILED

2019 APR 10 PM 6: 40

(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears of Tability Company)	n our records.) SEOR TALL SEOR SEC. FL
The Articles of Organization for this Limited Li	ability Company	were filed on February	ary 22, 2019 and assigned
Florida document number L19000052821			
This amendment is submitted to amend the following			
A. If amending name, enter the new name of	the limited liab	ility company here	:
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the desig	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		166 Byrd Dr.	
Principal office address MUST BE A STREE		Callaway, FL. 324	04
			·
Inter new mailing address, if applicable:		166 Byrd Dr.	
Mailing address MAY BE A POST OFFICE BOX)		Callaway, FL. 324	04
i. If amending the registered agent and egistered agent and/or the new registered o	or registered o	ffice address on o	our records, enter the name of the n
Name of New Registered Agent:			
New Registered Office Address:	166 Byrd Dr.		
new negative office , indica.		Enter Floride	a street address
	Callaway		Florida $\frac{32404}{Zip\ Code}$
		City	Zip Code
ow Registered Agent's Signature, if changing	Registered Agent:	<u>.</u>	
hereby accept the appointment as registere	ed agent and agr	ree to act in this ca	pacity. I further agree to comply with t

If Changing Registered Agent, Signature of New Registered Agent

ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ing filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

it amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u> Title</u>	Name	Address	Type of Action
AMBR	Paris Murray		Add
		1414 Gulf Ave. Panama City, FL.	
		32401	■ Remove
			Change
MBR	Patricia Palma	166 Byrd Dr. Callaway, FL. 32404	
	•		Remove
			Change
1BR	Emile Wolfaardt	166 Byrd Dr. Callaway, FL. 32404	
			■ Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
			Change
_			Add
			Remove
		·	Change
~			Add
			□ Remove
			Change

	
	
	 _
Effective date if other than the date of filing:	
If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursu	uant to 605.0207
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n	ot be listed as
document's effective date on the Department of State's records.	
ne record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the	ne earlier of
The 90th day after the record is filed.	
April 8th /2019	
Dated April 6th	
Signature of a member or authorized representative of a member	
Signature of a memora of damage and a second of the second	
Richard Gleason	
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00